

**APPENDIX B – PROCUREMENT AND CONTRACTUAL AGREEMENTS  
SIGNATORY ACCEPTANCE**

Statement of Acceptance

The terms and conditions contained in this Request for Proposals constitute a basis for this procurement. These terms and conditions, as well as others so labeled elsewhere in this document are mandatory for the resultant contract. The Office of the Healthcare Advocate is solely responsible for rendering decisions in matters of interpretation on all terms and conditions.

Acceptance Statement

On behalf of \_\_\_\_\_, I,  
agree to accept the Mandatory Terms and Conditions as set forth in the Office of the Healthcare Advocate State Innovation Model Program Management Office's Request for Proposals for Practice Transformation Services.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date